

Overview**Reflex Tests**

Test Id	Reporting Name	Available Separately	Always Performed
FGHA	Gamma-Hydroxybutyric Acid, CF, SP	No	No

Testing Algorithm

If the GHB Screen S/P is non-negative, then the Gamma-Hydroxybutyric Acid, CF, SP (FGHA) will be performed at an additional charge.

Method Name

Liquid Chromatography with Tandem Mass Spectrometry (LC/MS/MS)
Gas Chromatography/Mass Spectrometry (GC/MS) (if appropriate)

NY State Available

Yes

Specimen**Specimen Type**

Varies

Specimen Required

Submit only 1 of the following specimens:

Serum

Specimen Type: Serum

Container/Tube: red-top tube(s)

Specimen Volume: 5 mL

Collection Instructions: Draw blood in a plain red-top tube(s), serum gel tube is not acceptable. Spin down and send 5 mL of serum refrigerated in a plastic vial.

Min Vol: 1.2 mL

Plasma

Specimen Type: Plasma

Container/Tube: green-top (sodium heparin)

Specimen Volume: 5 mL

Collection Instructions: Draw blood in a green-top (sodium heparin) tube(s), plasma gel tube is not acceptable. Spin down and send 5 mL of sodium heparin plasma refrigerated in a plastic vial.

Min Vol: 1.2 mL

Specimen Minimum Volume

1.2 mL

Reject Due To**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	7 days	
	Ambient	72 hours	
	Frozen	180 days	

Clinical & Interpretive**Reference Values**

Reference Range: Negative

Screening threshold: 10.0 ug/mL

Performance**PDF Report**

No

Day(s) Performed

Monday, Wednesday, and Friday

Report Available

7 to 9 days

Performing Laboratory Location

Medtox Laboratories, Inc.

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

This test was developed and its performance characteristics determined by Labcorp. It has not been cleared or approved by the Food and Drug Administration.

CPT Code Information

80307

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FGHSP	GHB Screen, S/P	46085-7

Result ID	Test Result Name	Result LOINC® Value
Z4223	GHB	46085-7